Joint Statement was signed between the Ministry of Health and Family Welfare of the Republic of India and the Department of Health & Human Services of the United States of America on Expansion of India-US cooperation on Emerging and Re-emerging Infectious Diseases and Diseases Surveillance on 7 June, 2005.

(b) The collaboration focuses on collaborative applied research relating to emerging infectious diseases, strengthening disease surveillance, prevention and control and effective out break investigation and response. The Centre for Disease Control and Prevention (CDC),USA and National Institute of Communicable Diseases, Dte. General of Health Services, and Indian Council of Medical Research in India are the collaborative parties. The NICD and ICMR involve other Indian Institution of excellence, including those belonging to State Governments and the Department of Biotechnology as essential partners in the network for diseases surveillance.

(c) As a part of the Joint Statement both Governmental and non-Governmental Organizations in both the countries will be involved, as well as other regional and international organization partner, as appropriate, on collaborative applied research relating to emerging infectious diseases, strengthened disease surveillance, etc.

Regulatory Authority for Drugs

643. SHRI K. RAMA MOHANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are considering of setting up of an independent regulatory authority to make drug regulation more stringent to ensure quality and standards;

(b) if so, whether any move in this direction has been made by his Ministry;

(c) if so, the details thereof; and

(d) what are the measure that Government are now taking to enforce standards and ensure proper labeling of drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) A

Cabinet Note has been prepared for the approval of the Cabinet for (i) Establishment of an independent and autonomous Central Drug Authority of India having financial and administrative autonomy and accountable to the Central Government through Ministry of Health & Family Welfare. (ii) Amendments in the Drugs & Cosmetics Act 1940, to provide statutory basis for the proposed Central Drug Authority of India. (iii) Proposed administrative and staff structure of the Central Drug Authority of India. (iv) Financial autonomy and Approval for the proposed Drug Authority to retain fees realized for administrative and operational purposes of the Authority. (v) A phased five year transition from the present system of grant of manufacturing licences to a complete central licensing of drug manufacturing units from State to Union Government.

(d) Appropriate norms have been prescribed under the provisions of the Drugs and Cosmetics Rules, 1945 to ensure that the drugs are manufactured as per the prescribed stands and in compliance with the requirements of Good Manufacturing Practices (GMPs). The norms for proper labeling of drugs have been prescribed under Rule 96 of Drugs and Cosmetics Rules. These provisions are enforced by the State Drugs Control Organizations, who also collect samples of drugs from manufacturing premises as well as from the market to ensure that quality standards are maintained.

Standardisation of Ayurvedic Medicines

644. SHRI C. PERUMAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the major hurdle in the wider acceptability of ayurvedic drugs is the absence of standardisation and lack to acceptable procedure to establish standards;

(b) if so, whether any step has been taken to establish standards for ayurvedic drugs;

(c) if so, the details thereof; and

(d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d)